

00862.003158

PATENT APPLICATION



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

#11/C
LJW
9-16-03
entered

In re Application of:

SHOICHI YAMAGUCHI

Application No.: 09/452,188

Filed: December 2, 1999

For: COMMUNICATION APPARATUS
AND METHOD

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Examiner: Y.N. Won
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TC/Art Unit: 2155
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September 10, 2003

Commissioner for Patents
Mail Stop: Non-Fee Amendment
P.O. Box 1450
Alexandria, VA 22313-1450

RECEIVED

SEP 12 2003
Technology Center 2100

AMENDMENT

Sir:

In response to the Office Action dated June 11, 2003, the Examiner is
respectfully requested to amend the above-identified application as follows:

2155



In re Application of:

SHOICHI YAMAGUCHI

Application No.: 09/452,188

Filed: December 2, 1999

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Docket No. 0862.003158

Examiner: Y.N. Won

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Technology Center 2100

COMMISSIONER FOR PATENTS
Mail Stop: Non-Fee Amendment
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below


CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 18	MINUS	** 20	= 0	x \$9 \$18	0
INDEP. CLAIMS	* 3	MINUS	*** 3	= 0	x \$42 \$84	0
Fee for Multiple Dependent claims \$140°/\$280						0
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						0

- * If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

☐ °Verified Statement claiming small entity status is enclosed, if not filed previously.

- ☐ A check in the amount of \$_____ is enclosed.
- ☐ Charge \$_____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate of this sheet is enclosed.
- ☐ A check in the amount of \$_____ to cover the fee for a _____ month extension is enclosed.
- ☐ A check in the amount of \$_____ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicant's undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our address given below.

Respectfully submitted,



Attorney for Applicant
LOCK SEE YU-JAH
Registration No. 38,667

FITZPATRICK, CELLA, HARPER & SCINTO
30 Rockefeller Plaza
New York, New York 10112-3801
Facsimile: (212) 218-2200

Form #120

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